

# Regulation of Blood Pressure

Index:

Red: important

Grey: extra information

Green: doctor's notes

yellow: numbers

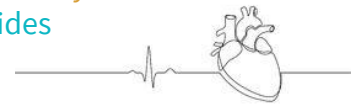
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Physiology  
Team437

Physiology 437 teamwork



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## OBJECTIVES

by the end of this lecture you will be able to:

- ▶  List the short, intermediate and long-term mechanisms regulating ABP.
- ▶  Understands how baroreceptors prevent significant changes in BP and why they act for short-term control.
- ▶  Understand why chemoreceptors work under emergency conditions to control BP.
- ▶  List the anatomical components of baroreceptors/chemoreceptors.
- ▶  Explains the role of the kidney in the long-term regulation of ABP.

# Regulation of Arterial Blood Pressure

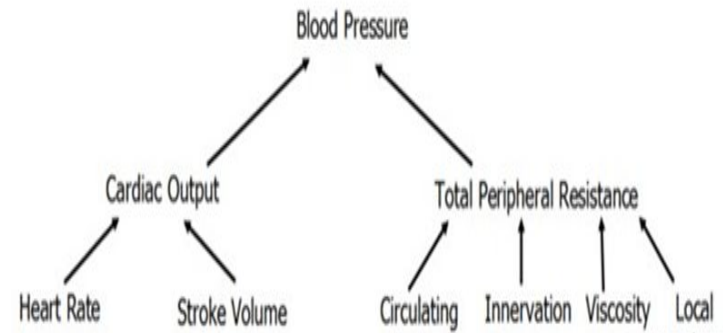
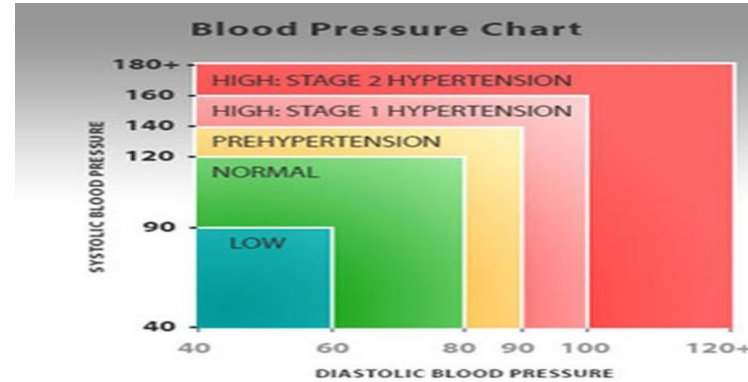
Importance of regulation arterial blood pressure :

- Maintaining BP is important to ensure a steady blood flow (perfusion) to the tissues
- Inability to regulate blood pressure can contribute to diseases.

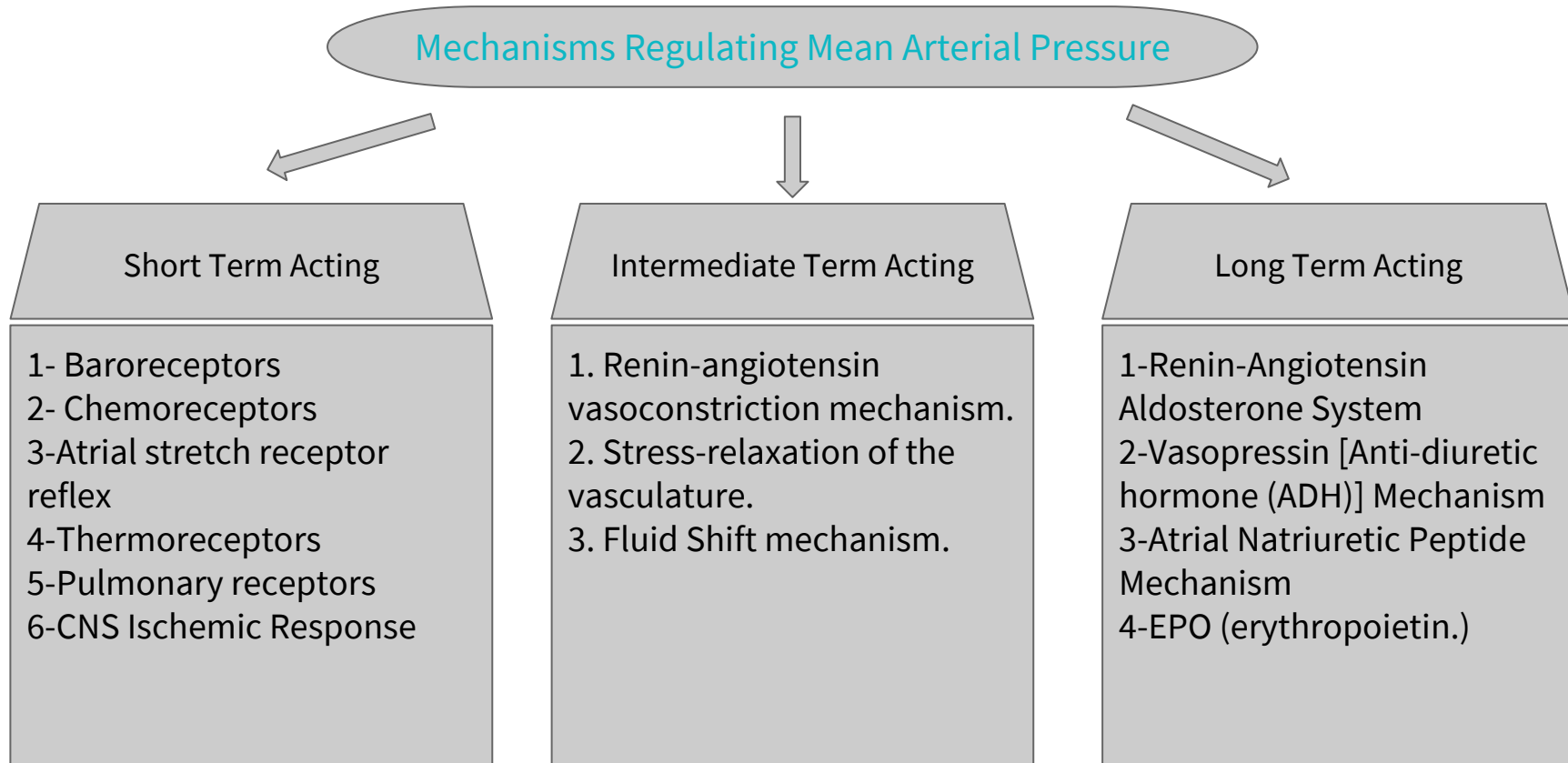
In order to regulate the blood pressure, determining factors should be regulated:

1. Cardiac Output.
2. Peripheral Resistance.
3. Blood Volume.

Changing in one of them can affect blood pressure.



# Mechanisms Regulating Mean Arterial Pressure

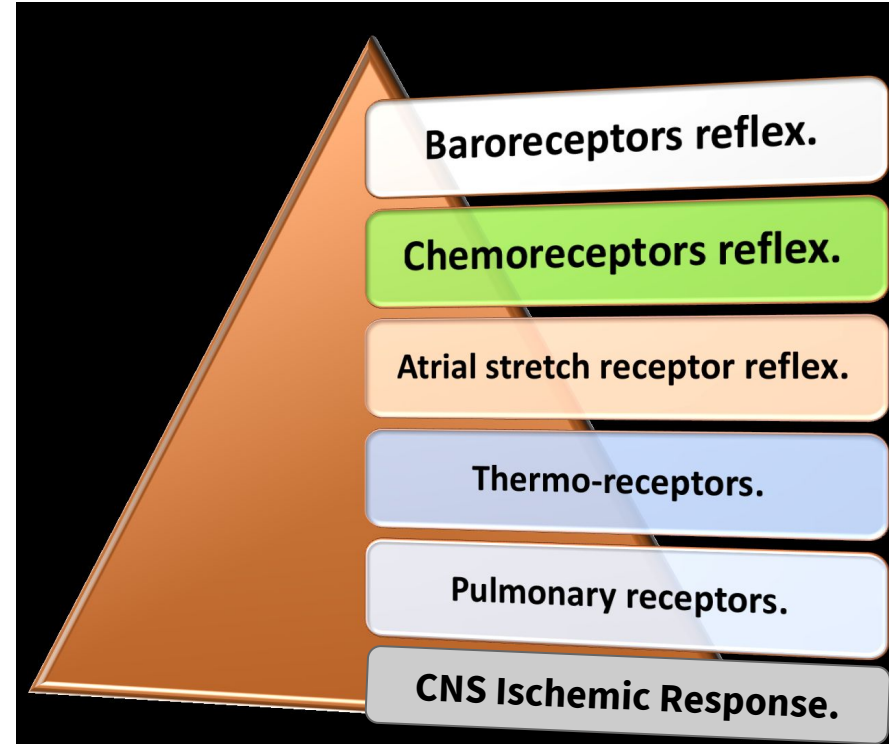


## Rapidly Acting Control Mechanisms “Short Term Acting”

Acts within sec/min.  
Concerned in regulating CO & PR.

Reflex mechanisms that act through autonomic nervous system “Centers in Medulla Oblongata”:

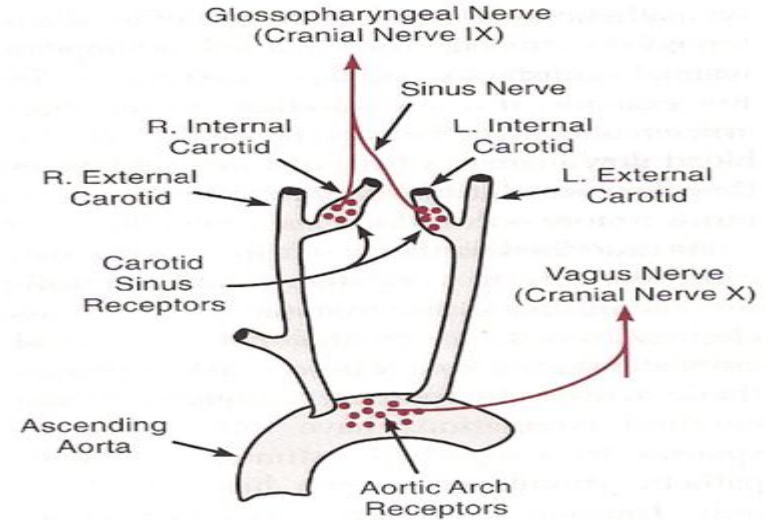
- Vasomotor Center (VMC)
  - Sympathetic nervous system
- Cardiac Inhibitory Center (CIC)
  - Parasympathetic nervous system



# The Baroreceptors

## "Baroreceptor reflex"

- ❑ Mechano-stretch receptors.
- ❑ Located in the wall of carotid sinus & aortic arch.
- ❑ Fast & neurally mediated.
- ❑ These receptors provide information to the cardiovascular centres in the medulla oblongata about the degree of stretch with pressure changes.
- ❑ Provide powerful beat-to-beat control of arterial blood pressure.
- ❑ Stimulated in response to blood pressure changes "Mean Arterial Pressure" MAP.



The impulses of the **aortic receptors** are carried by **vagus nerve** (Cranial Nerve X)  
The impulses of the **carotid receptors** are carried by **glossopharyngeal nerve** (Cranial Nerve IX)

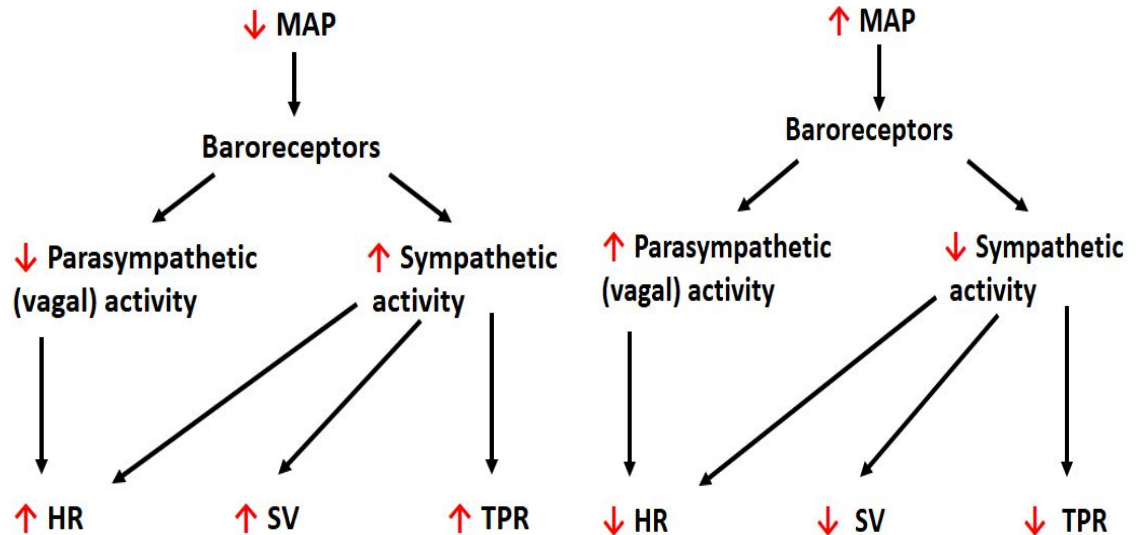
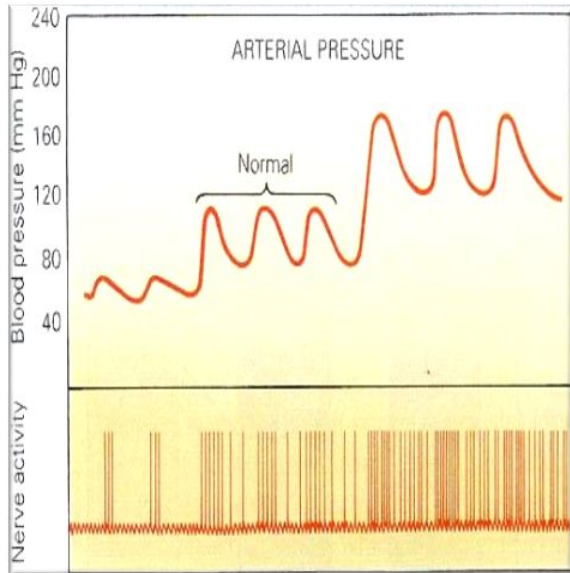
# Firing Rate of Baroreceptors

Increased  
BP "MAP"

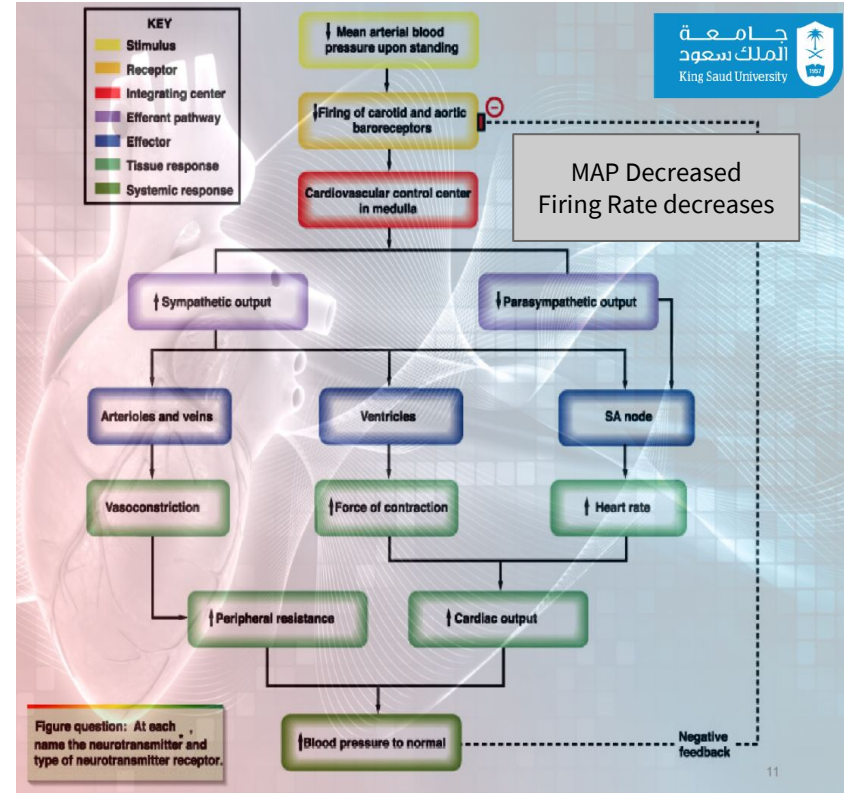
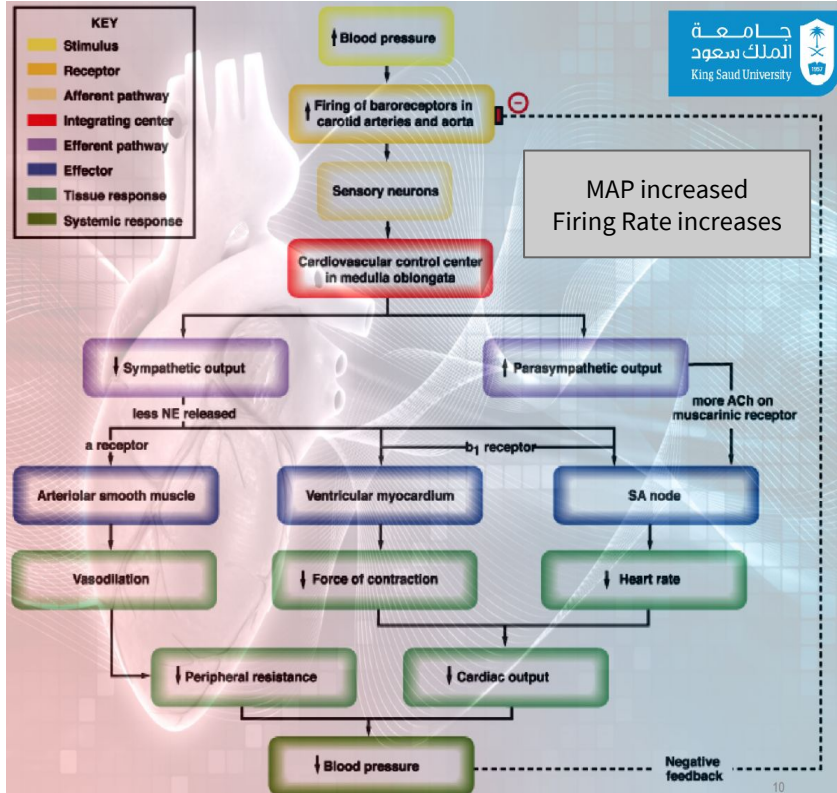
Increases their rate of activity "Firing rate"

Decreased  
BP "MAP"

Decrease their rate of activity "Firing rate"



# Cont. Firing Rate of Baroreceptors





## Baroreceptor Reflex Mechanism During Changes in Body Posture

- ▶ Immediately on standing, arterial pressure in the head and upper part of the body tends to fall? **cause loss of consciousness.**
- ▶ Falling pressure at the baroreceptors elicits an immediate reflex, resulting in **strong sympathetic discharge** throughout the body.
- ▶ This minimizes the decrease in pressure in the head and upper body.

## Chemoreceptor Reflex

- ▶ Closely associated with the baroreceptor pressure control system.
- ▶ **Chemoreceptor reflex** operates in much same way as the baroreceptor reflex, **EXCEPT** that chemoreceptors are chemo-sensitive cells instead of stretch receptors.

### Types of Chemoreceptor Reflexes

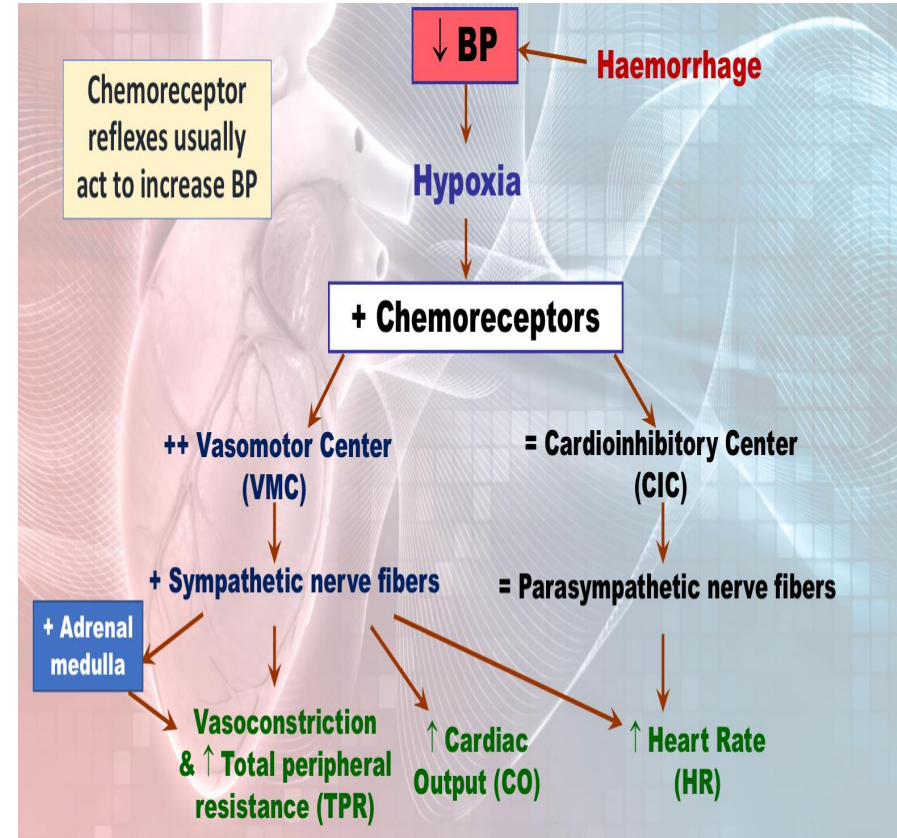
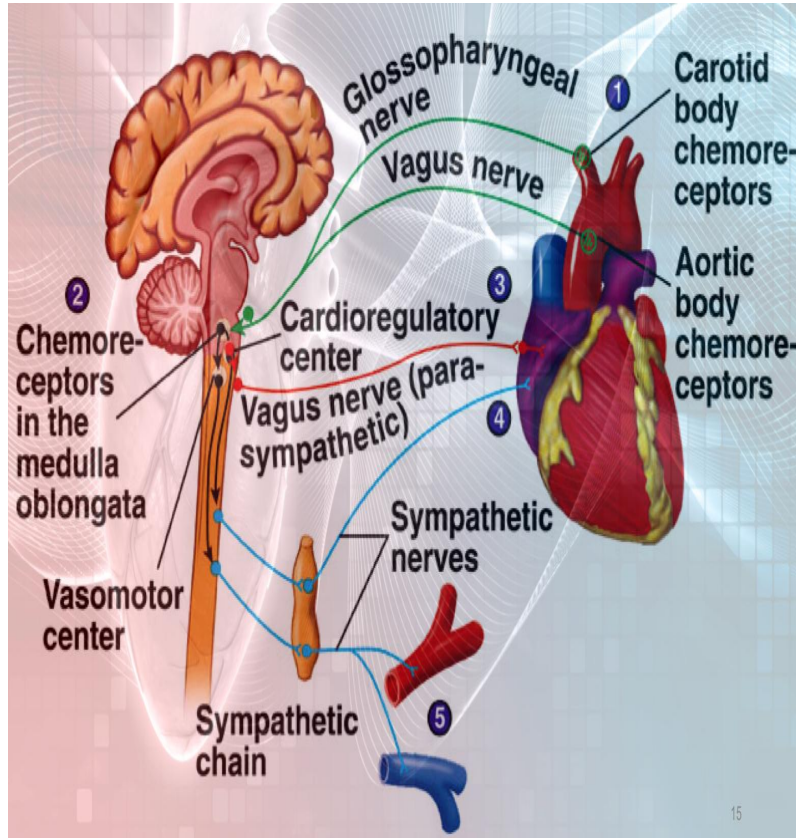
#### Peripheral chemoreceptors:

- 1-Sensory receptors located in carotid & aortic bodies.
- 2-Sensitive to Oxygen( $\downarrow$ ), carbon dioxide ( $\downarrow$  or  $\uparrow$ ), and pH ( $\uparrow$  or  $\downarrow$ )
- 3-Chemoreceptors' stimulation excite nerve fibers, along with baroreceptor fibers.

#### Central Chemoreceptors

- 1-Sensory receptors located in the medulla itself.
- 2-Very sensitive to carbon dioxide excess(  $\uparrow$ ) and pH ( $\downarrow$ ) in medulla.

# Peripheral chemoreceptor reflex



## CNS Ischemic Response: “Last ditch stand” pressure control mechanism

- ▶ It is not one of the normal regulatory mechanisms for ABP.
- ▶ It operates principally as an **emergency pressure control system** to prevent further decrease in arterial pressure.
- ▶ It acts **rapidly & very powerfully** whenever blood flow to the brain decreases dangerously close to the lethal level.
- ▶ Local concentration of **CO<sub>2</sub> increases** greatly.
- ▶ This has an extremely potent effect in stimulating the sympathetic vasomotor nervous control areas in the brain’s medulla.
- ▶ When MAP < 20 mmHg → cerebral ischemia of vasomotor center → strong excitation of vasomotor center (due to accumulation of CO<sub>2</sub>, lactic acid) → strong vasoconstriction of blood vessels including the kidney arterioles.

# Atrial Stretch Volume Receptors:

▶ **Atrial stretch receptor reflex:**

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- Increased venous return → ++ atrial stretch receptors → **reflex vasodilation & decreased ABP**

Receptors in large veins close to heart, walls of the atria (response of blood volume).

ONLY in male slides

An increased blood volume → stretch of atria → activate atrial volume receptors → sensory afferent nerves to medulla → inhibiting the cardiovascular centre.

This results into decreased blood volume through:

a) ↓ **sympathetic drive to kidney:**

- i) → dilate afferent arterioles → ↑ glomerular capillary hydrostatic pressure → ↑ GFR → ↓ blood volume (towards normal).
- ii) ↓ renin secretion (Renin is an enzyme which activates angiotensinogen in blood).
  - Inhibition of renin secretion → inhibit RAAS → inhibit aldosterone production → ↓ Blood volume (towards normal)

b) ↓ **ADH secretion** → ↓ blood volume (towards normal).

c) ↑ **Atrial Natriuretic Peptide** (ANP) causes loss of blood volume.

# Other Vasomotor Reflexes:

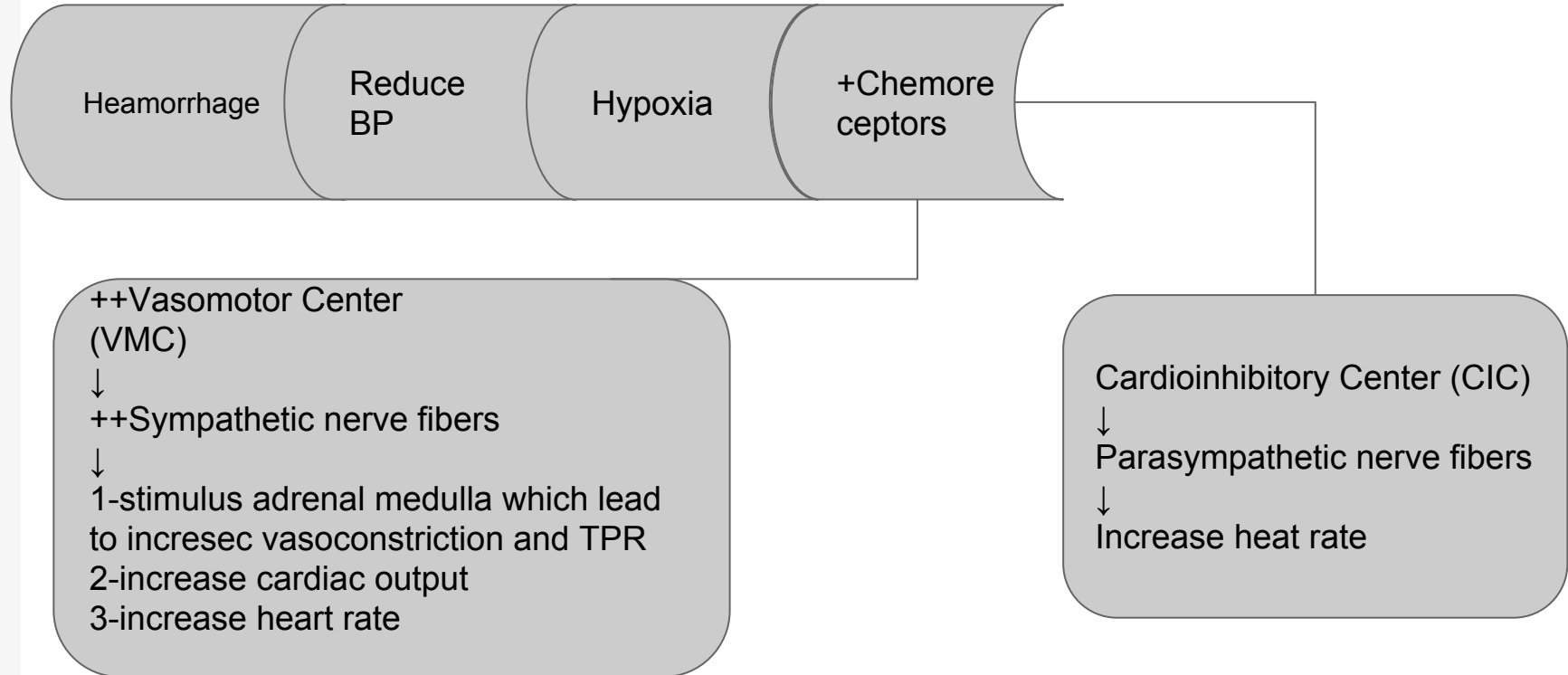
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▶ **Pulmonary receptors:**

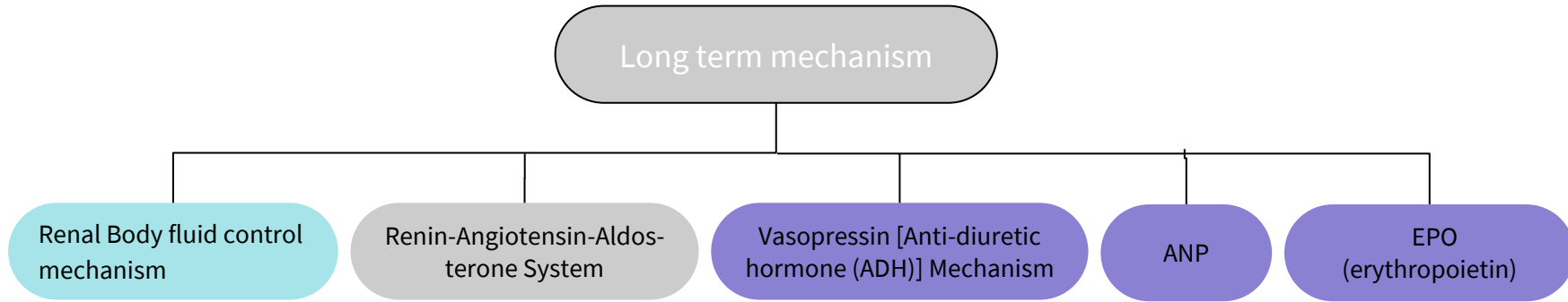
- Lung inflation → **vasoconstriction**

▶ **Thermo-receptors:**

- Exposure to heat → **vasodilation**
- Exposure to cold → **vasoconstriction**

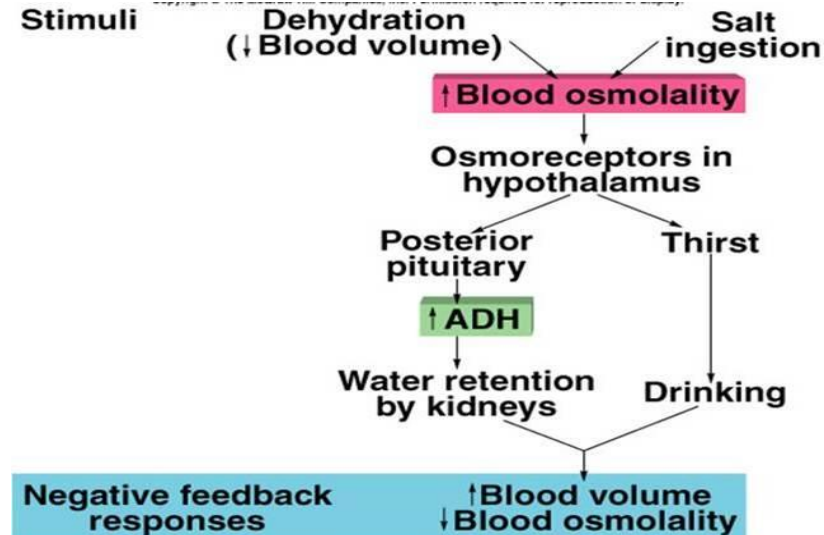
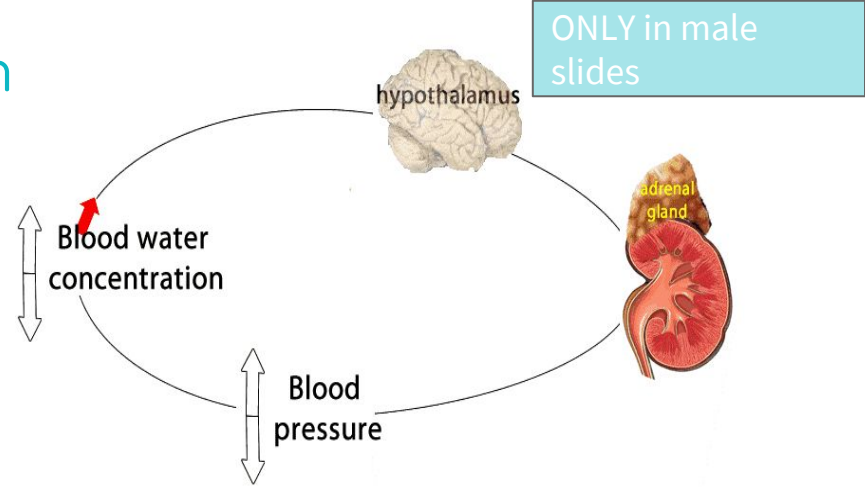
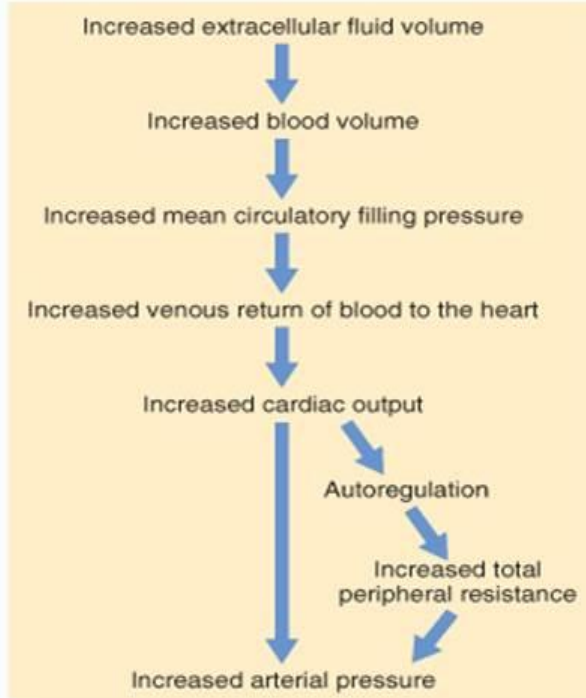


# LONG TERM REGULATION OF BLOOD PRESSURE (acting within days to months)



- Hormonally mediated.
- Takes few hours to begin showing significant response.

# Renal Body fluid control mechanism



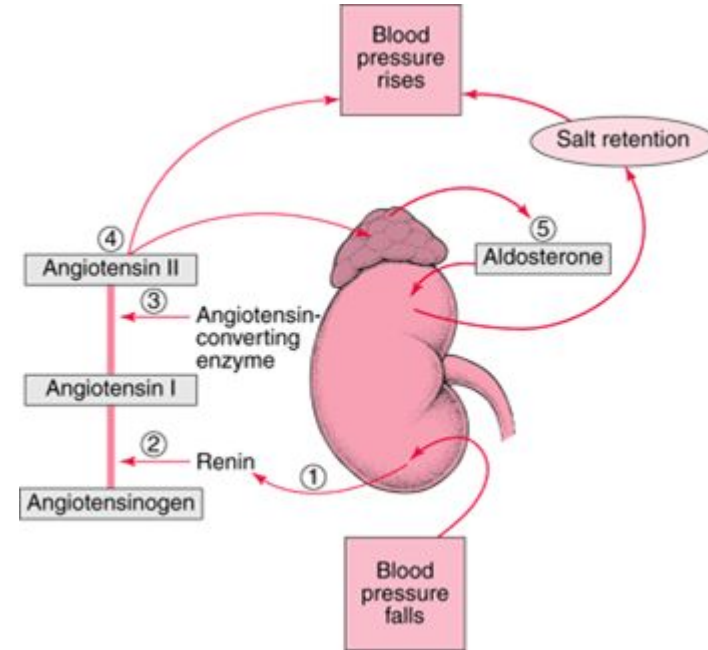
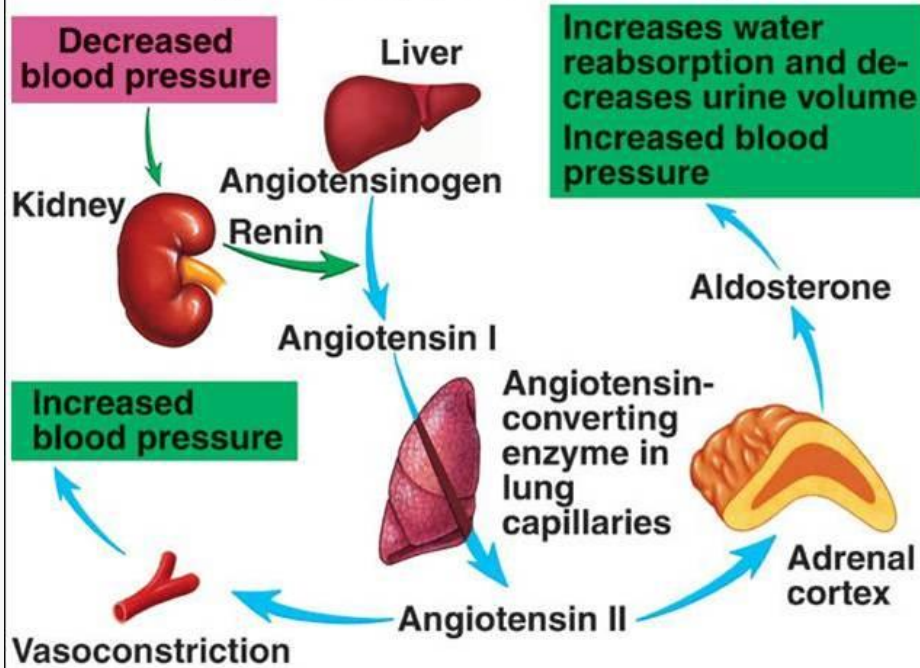


# Renin - Angiotensin Aldosterone System

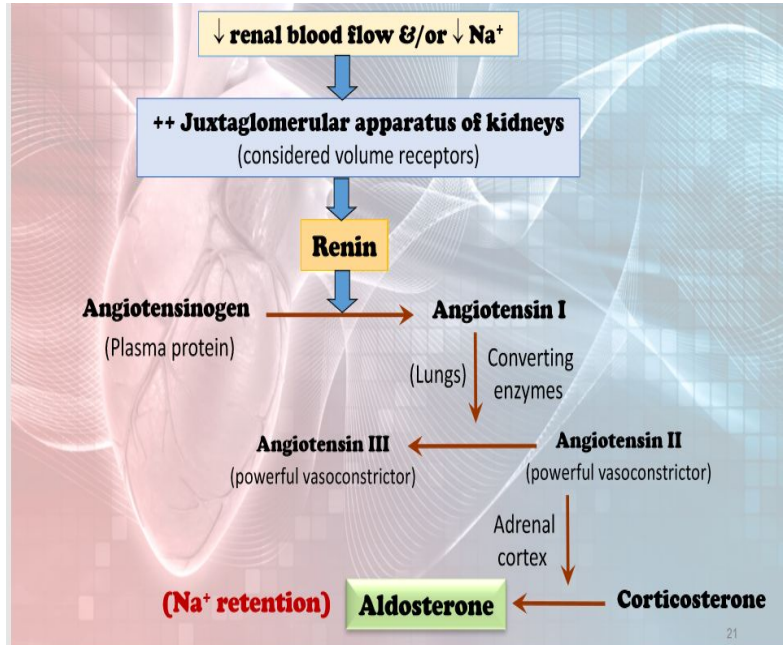
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# Renin – Angiotensin Aldosterone System



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## Vasopressin [Anti-diuretic hormone (ADH)] Mechanism

- Hypovolemia & dehydration stimulates Hypothalamic Osmoreceptors.
- ADH will be released from posterior pituitary gland:
  - Promotes water reabsorption at kidney tubules  $\uparrow$  blood volume.
  - Causes vasoconstriction, in order to  $\uparrow$  ABP.
- Thirst stimulation.
- Usually, when secreted aldosterone is secreted.

## Atrial Natriuretic Peptide (ANP) hormone:

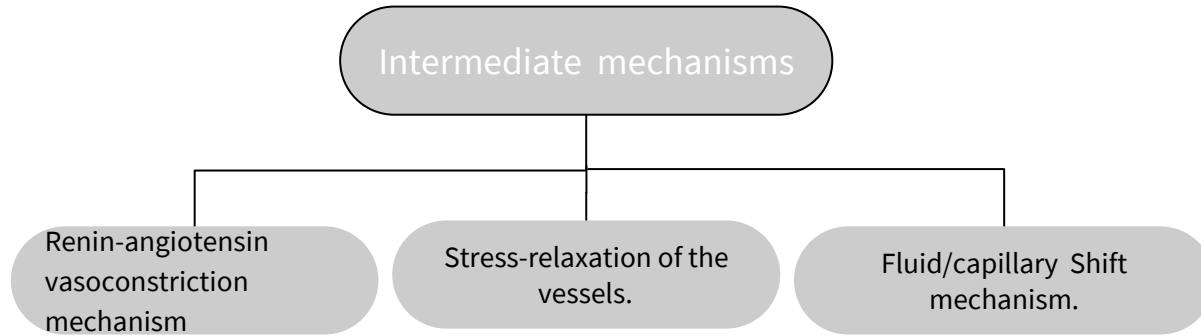
- Hormone released from cardiac muscle cells (wall of right atrium) as a response to an increase in ABP.
- Stimulates an  $\uparrow$  in urinary production, causing a  $\downarrow$  in blood volume & blood pressure.

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## EPO (Erythropoietin)

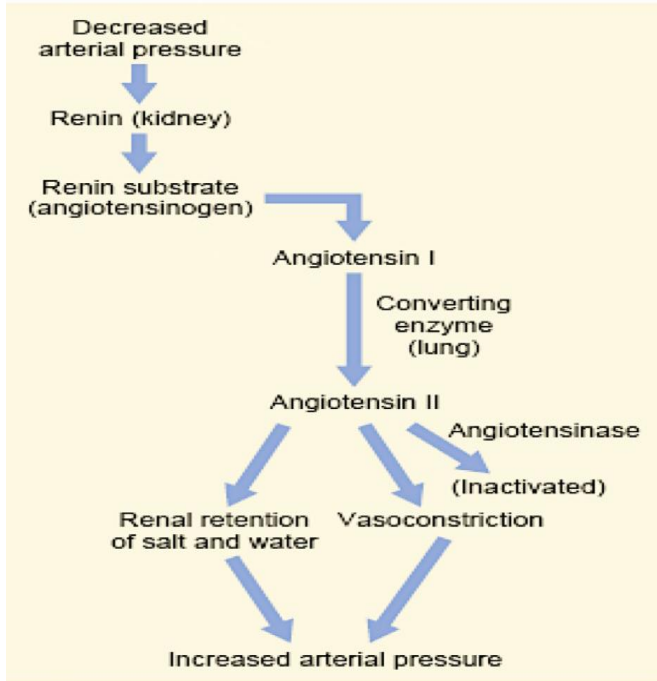
- Secreted by the kidneys when blood volume is too low.
- Leads to RBCs formation  $\rightarrow$   $\uparrow$  blood volume

## Intermediate Mechanisms: Activated within 30 min to several hrs.



During this time, the nervous mechanisms usually become less & less effective.

# 1. Angiotensin Vasoconstriction System



# 2. Fluid Shift Mechanism

- ▶ Movement of fluid from interstitial spaces into capillaries in response to ↓ BP to maintain blood volume.
- ▶ Conversely, when capillary pressure ↑ too high, fluid is lost out of circulation into the tissues, reducing blood volume as well as all pressures throughout circulation.

### 3. Stress-Relaxation Mechanism

- ▶ Adjustment of blood vessel smooth muscle to respond to changes in blood volume.
- ▶ When pressure in blood vessels becomes **too high**, they become stretched & keep on stretching more & more for minutes or hours; resulting in fall of pressure in the vessels toward normal.
- ▶ This continuing stretch of the vessels can serve as an intermediate-term pressure “**buffer.**”

**Arterial Blood Pressure Regulation****Neurally-Mediated Regulation of ABP**, fast response ( short term ):

- Baroreceptors reflex.
- Chemoreceptors reflex.
- Atrial stretch receptor reflex.
- Thermoreceptors.
- Pulmonary receptors.

**Intermediate mechanisms**, Activated within 30 min to several hours:

- Renin-Angiotensin vasoconstriction mechanism.
- Stress-relaxation of the vasculature.
- Fluid shift mechanism

**Hormonally-Mediated Regulation of ABP**, slow response ( long term ):

## Mainly:

- Renin-Angiotensin-aldosterone system.
- Vasopressin {Antidiuretic hormone (ADH) }

## Others:

- Atrial natriuretic peptide mechanism
- Erythropoietin

## Quiz

1. Chemoreceptors are stimulated when the MAP is lower than ?

- A- 100 mmHg
- B- 120 mmHg
- C- 60 mmHg
- D- 80 mmHg

2. Which one of the following is considered a long term regulation of blood pressure ?

- A- capillary shift mechanism
- B- renal body fluid control mechanism
- C- chemoreceptors mechanism
- D- baroreceptors reflex mechanism

3. Which one of the following mechanism play an important role in maintaining relatively constant blood flow to vital organs ?

- A- capillary shift mechanism
- B- renal body fluid control mechanism
- C- chemoreceptors mechanism
- D- baroreceptors reflex mechanism



## Quiz

4. Which one of the following is hormonally mediated regulation of ABP ?

- A- Atrial stretch receptor reflex
- B- thermoreceptors
- C- EPO
- D- pulmonary receptors

5. Which one of the following true if the blood pressure increases ?

- A- decrease firing of the baroreceptors in the carotid arteries and aorta
- B- increase firing of the baroreceptors in the carotid arteries and aorta
- C- increase sympathetic output
- D- decrease parasympathetic output

6. In the central chemoreceptors the sensory receptors located in the ?

- A- carotid bodies
- B- aortic bodies
- C- carotid & aortic bodies
- D- medulla itself

# Thank you for checking our work

## Team Leader:

العنود سلمان

## Male Team:

أنس السويداء  
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 ريم القرني  
 ليلي الصباغ  
 فلوثة السعوي  
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## Any questions?

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